patients were women receiving 'fresh' cycles of IVF/ICSI from October 2001 to January 2006 at a UK ART unit that treats National Health Service and privately funded patients. All patients were treated with rFSH (Puregon™) for ovarian stimulation. Rates of ongoing pregnancies per cycle and live birth rates were calculated from clinic records. Drug use was determined using pharmacy dispensing data. Costing for clinic procedures was based on a financial audit of the centre. Costs were applied at UK 2007 prices. **RESULTS:** After excluding non IVF/ICSI cycles, those lacking pharmacy data and complete cycle data we analysed 1418 cycles undertaken by 1001 women. Mean duration of ovarian stimulation was 9.1 days (95%CI: 9.0–9.3 days). The clinical pregnancy rate/cycle was 36.4% (95%CI: 33.9–39%), the ongoing pregnancy rate was 24.4% (95%CI: 22.2%–26.7%), and the live birth rate was 22% (95%CI: 19.7–24.2%). The average rFSH dose/cycle prescribed was 1855 units (SD: 561), whereas the average dispensed dose/cycle was 1891 units (SD: 540). The average cost of rFSH/cycle was £646 (SD: 219). Average cost/cycle for concomitant medications and procedures was £159 (SD: 122) and £2,127 (SD: 349), respectively. The average total cost/cycle was £2.932 (SD: 422). The average cost/clinical pregnancy, cost/ongoing pregnancy and cost/live birth were £8,058, £12,017 and £13,326, respectively. **CONCLUSIONS:** While IVF/ICSI outcomes in this real-life clinical setting were similar to UK averages, the cost of rFSH/cycle was lower than that estimated in the NICE guidelines. These findings suggest that NICE should revisit the affordability of funding recommended levels of IVF/ICSI, taking efficient drug delivery practices into account.

INDIVIDUAL'S HEALTH—Patient-Reported Outcomes Studies

PIH15

HEALTH-RELATED QUALITY OF LIFE IN ADOLESCENTS WITH THE PRADER-WILLI SYNDROME

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OBJECTIVES: To assess the long-term effects of growth hormone (GH) treatment on physical features, safety and health-related quality of life (HRQoL) in patients with the Prader-Willi syndrome (PWS), as compared to general population. PWS is a complex genetic disorder characterized by e.g. mental retardation, behavioral disorders, obesity, hypogonadism, and short stature. **METHODS:** All 22 known Finnish paediatric patients aged 2–10 years with PWS were contacted for participation in a clinical study of one year between 1996 and 1998 for treatment with GH (somatropin, 0.1 IU/kg/d); 20 patients participated. Thereafter, they were treated in their own hospital districts with various GH regimens. The subjects were invited to a follow-up study consisting of one visit in 2007. Altogether 19 out of the 20 in the original study participated in the follow-up and underwent a comprehensive evaluation, including HRQoL measurement by the 16D. The 16D is a generic, comprehensive, 16-dimensional (mobility, seeing, hearing, breathing, sleeping, eating, speech, elimination, going to school, mental function, discomfort and symptoms, depression, distress, vitality, appearance, and getting and having friends), self-administered measure of HRQoL for adolescents, and it can be used both as a profile and single score measure. Pre-existing data from 1995 of a sample of Finnish age-matched population (n = 239) were used for comparison using the independent samples t-test. Results for the physical outcomes are reported separately. **RESULTS:** The mean 16D score was 0.851 for the study patients and 0.949 for the comparator population; the difference is statistically significant (p = 0.001). The patients were worse off than the general population on the dimensions of mobility, breathing, speech, mental function, going to school, discomfort and symptoms, and getting and having friends. **CONCLUSIONS:** Despite GH treatment, the self-perceived HRQoL of these adolescent and young, adult PWS patients remains poor on several dimensions and overall compared with age-matched general population.

PIH16

PSYCHOMETRIC PERFORMANCE OF THE CHILDREN'S DERMATOLOGY QUALITY OF LIFE INDEX

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OBJECTIVES: To assess the psychometric performance of the Children's Dermatology Quality of Life Index (CDQoL) in Turkish pediatric dermatology patients. The CDQoL is a specific quality of life index and which measures the impact of dermatology symptoms on QoL. **METHODS:** The health-related quality of life (HRQoL) is measured in a sample of 90 patients with dermatological problem using both the Turkish version of the CDQoL and the Short Form 10 (SF-10) instruments. **RESULTS:** The internal consistency within the domains of the CDQoL was good, with Cronbach's Alpha values 0.78 for the CDQoL and 0.91 for the SF-10. Significant correlations were observed between the total scores of the CDQoL and the SF-10. **CONCLUSIONS:** Overall, the results indicated that the psychometric performance of the CDQoL in the study sample was quite good and the instrument was found to be valid and reliable. The instrument is likely to be suitable for use in clinical studies of chronic dermatological diseases in Turkey.

PIH17

TURKISH CULTURAL ADAPTATION AND VALIDATION OF THE MENOPAUSE-SPECIFIC QUALITY OF LIFE QUESTIONNAIRE

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OBJECTIVES: The short, self administered Menopause Specific Quality of Life Questionnaire (MSQoL) is a specific quality of life instrument which measures the impact of menopause symptoms on QoL. This study aims to adapt the MSQoL questionnaire into Turkish (for Turkish) culture and check the questionnaire psychometric properties. **METHODS:** The original instrument was translated and back translated by two independent translators. For psychometric measures, a small sample was used to check the initial comprehension and factibility. Cronbach's Alfa was used to assess reliability and factor analysis to assess dimensionality. The EuroQol questionnaire and corresponding Visual Analogue Scales were used for concurrent validity. **RESULTS:** 160 women with menapause syndrom were participated. Mean age was 49. The reliability was good (Alpha = 0.97) and all dimensions eigenvalues higher than 1.0, explaning 78.9% of avaliable variability. All items loaded on own dimensions. Correlations were moderate with EuroQol and VAS. **CONCLUSIONS:** The Menapause Specific Quality of Life Questionnaire has good psychometric properties. It is also capable to discriminate women with a menapause.